

OVERVIEW

Counseling services often target a particular symptom or problematic situation and offer guidance for effective change. Counseling involves the application of clinical counseling principles, methods or procedures for the purpose of achieving social, personal and emotional development. For some children and families in the foster care system, counseling services provide a short-term treatment that is focused on behavior.

Counseling services can be used to provide treatment to:

- Address current family situations and strengthen family systems.
- Reduce the risk of child abuse or neglect in a home.
- Enhance individual or family functioning.
- Provide opportunities for self-exploration, adaptation and new functional behaviors for children in out-of-home placements.

If a child's behavior is considered out-of-control or extremely destructive, the local Community Mental Health (CMH) agency may be a resource for assessment and/or treatment. Children who are seriously emotionally disturbed (SED) and their families can benefit from services that may be much more comprehensive and responsive than those available from the DHS contracted therapist.

The following counseling services are provided through the referral process and reimbursed through DHS:

- Counseling services for youth in foster care under the supervision of DHS.
- Counseling services for parents/caregivers that are part of the reunification household. DHS is responsible for reimbursement for counseling services provided to these family members, regardless of whether the youth is supervised directly by DHS or by a placement agency foster care provider. For a DHS contracted therapist to receive payment, a referral must be issued by DHS. Prior to the DHS contracted therapist billing DHS, the placement agency foster care provider must:

Contact a therapist contracted with DHS (the local DHS office has the option of identifying their preferred therapists) to confirm that the therapist is available and willing to accept the referral.

Complete the referral information and send the request through the DHS foster care monitor responsible for the case for submission and approval of the referral to the therapist; see referral process in this item.

Ineligible Services

The following services are not counseling services for foster care youth and their families:

- Parenting classes; for example, Love and Logic.
- Anger management classes.
- Work preparation/readiness classes.
- Independent living classes.
- Counseling services for youth in foster care under the supervision of a placement agency foster care provider.
 - The placement agency foster care provider is responsible for the cost of counseling services for foster care youth under their supervision.
 - DHS does not provide counseling referrals for placement agency foster care supervised foster care youth. Those agencies are not required to make referrals to therapists contracted with DHS.

Note: The ineligible services may not be billed by a DHS counseling contractor.

Referral Process

The DHS caseworker, in consultation with his or her supervisor, determines the client's (foster child and parents/caregivers that are part of the reunification household) eligibility for services. To be reimbursed by DHS, a counseling contractor cannot accept referrals from any source other than DHS. Counseling contractors can be found at <http://mdhsintranet.state.mi.us/Counseling/searchservice.aspx>.

Note: Within this section of the manual, the term client refers to either the foster child/youth or the parents/caregivers that are part of the reunification household.

When it is determined that counseling services are necessary and the client is eligible, the referral process requires the following steps from the caseworker:

- Contact the counselor/therapist by phone to discuss the referral and document in the social work contacts.
- Obtain the counselor's agreement to provide counseling services with the client.
- Complete the DHS-880, Child Welfare Counseling Services Referral.
 - The period of eligibility and number of counseling units must be listed.
 - No more than 12 units may be initially authorized.
 - Obtain supervisor signature.
- Send the DHS-880 to the counselor and document in social work contacts.

Note: Counseling services cannot begin until the counselor receives the appropriate referral form and approvals.

- File a copy of the referral in the child's case file.
- Upon receipt of the written DHS referral, the counselor must contact the referring caseworker to discuss the client's circumstances and discuss preliminary goals and objectives. Documentation of the contact with the counselor within the social work contacts in the case service plan is required.

Note: Any extensions for continued service must be in writing, listing the number of counseling units authorized and the dates that the service is authorized. Extensions must be signed by the referring caseworker, the supervisor, and approved by the county director on the DHS-880.

Service Delivery Requirements

Within 10 business days of receipt of a written referral from DHS, an initial session shall occur between the counselor and client. This initial session shall assess the client's:

- Current circumstances and view of the presenting concern.
- Developmental history, family structure, support system and employment.

- Physical health, emotional and mental status.

**Counseling
Services
Assessment and
Treatment Plan
Report (DHS-840)**

Within 10 business days of the initial session with the client, the counselor submits a DHS-840, Counseling Services Assessment and Treatment Plan Report, to the referring DHS caseworker. The report shall address:

- Record of client sessions, kept and missed appointments.
- Phone or other case contacts.
- Individual and/or family assessment.
- Diagnosis.
- Identified concerns and client strengths.
- Specific objectives and time frames. The objectives listed in the counselor's treatment plan shall be:
 - Behaviorally based and measurable.
 - Reflective of the interventions and strategies employed to achieve the overall goals of the counseling treatment sequence.
 - Developed by the counselor with the client and in consultation with the referring caseworker.

**Monthly DHS-840
Reports from
Therapist**

The DHS-840, Counseling Services Assessment and Treatment Plan Report, provides ongoing client information and progress updates to the caseworker. The DHS-840 is:

- Completed monthly by the counselor.
- Submitted to the caseworker within 10 business days following the end of each month.
- Inclusive of client progress made toward treatment objectives and indicative of any changes made in the treatment plan.

- An opportunity for the caseworker to closely monitor the client's progress or lack of progress with the service and provide feedback to the client.

**Termination of
Counseling
Services**

When counseling services are terminated, the counselor shall complete a DHS-841, Counseling Services Termination Summary. The summary is submitted to the caseworker no later than 10 working days following termination of services. The DHS-841 report addresses the following:

- Diagnosis at termination.
- Treatment summary.
- Objectives and progress towards objectives.
- Total number of sessions offered to the client.
- Number of sessions attended.
- Cooperation in treatment.
- Reason for closure.
- Recommendations.

**Monitoring Service
Provision**

Ongoing communication between the caseworker and the counselor provides the best assurance for a good working relationship and effective service for the referred client. The caseworker must keep the counselor informed of significant case developments, court hearings, permanency case conferences, changes in caseworkers, or address changes. The counselor needs to be notified before the DHS case is closed.

In monitoring the provision of services, the caseworker must review reports submitted by the counselor to ensure:

- All information listed in the service delivery section is included.
- The report is specific to the client and reflects updated information.
- Other contract requirements such as the following are addressed:
 - Did the counselor contact the client within three working days of a missed appointment?

- Did the counselor notify the caseworker by phone each time two consecutive appointments were missed?

**Contracted
Counseling
Service
Noncompliance**

Each contractor signs a CM-F910, Counseling Services Contract, that outlines the counselor's responsibilities, including the services to be delivered. If a counselor is not meeting the requirements, the following action(s) must be taken:

- The caseworker contacts the counselor, discusses the concerns, and documents the contact in the social work contacts.
- If the counselor does not address the concerns, the caseworker notifies his/her supervisor, in writing, of the issue.
- The supervisor or designated local office contract monitor reviews the caseworker's concerns and submits a written complaint to the local office director.
- The local office director submits the written complaint outlining the details of any action taken to date to the assigned Business Service Center Analyst.

The complaint must include:

- The name, address, phone number and contract or provider number of the counselor.
- A narrative explaining the specific contract violation and a chronology of attempts to work with the counselor to rectify the concern.